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Sheet 1

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Complete if Known Substitute for form 1449/PTO **Application Number** Filing Date CONCURRENTLY INFORMATION DISCLOSURE First Named Inventor SCHELLINGERHOUT STATEMENT BY APPLICANT Art Unit (Use as many sheets as necessary) Examiner Name Sarah Su Attorney Docket Number NL021276

				DOCUMENTS	
Examiner Initials*	Cite No. ¹	Document Number Number-Kind Code ^{2 (# known)}	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
/S.S./		Number-Kind Code		VEDOV CODE	
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		FOREIGN	PATENT DOCU	MENTS		
Examiner Initials*	Cite No.1	Foreign Patent Document	Publication Date	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages	
		Country Code ^{3 -} Number ^{4 -} Kind Code ⁵ (<i>if known</i>)	MM-DD-YYYY		Or Relevant Figures Appear	T ⁶
7S.S./		EP1081577A2	03-07-2003	Sony Corp.		
/S.S./		EP0715247A1	06-05-1996	Xerox Corp.		
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